



IMAS

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d'Assistència Sanitària**

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***For more information on the activities of IMAS and its centres,  
visit our website at: [www.imasbcn.org](http://www.imasbcn.org)***

The IMAS, like any other modern-day public healthcare institution, not only has to incorporate elements of technical competence and guidance for people into its quality healthcare service, it is also required to communicate and explain its projects and the results of its activities. There are several formulas and tools available to us so that we can achieve this objective. Some are included in the organisational structure: the governing bodies, composed of representatives from the administrations responsible, Barcelona City Council and the Catalan Government, and IMAS workers' representatives. Others aim, in a formal or informal way, to inform the community of the initiatives and operating results of the different IMAS centres and at the same time to find out the concerns and needs that need to be tackled in the community-healthcare system binomial.

This desire for communication and dialogue has traditionally been a characteristic of the IMAS. Its community service vocation, that of a hospital open to society and geared towards helping debilitated and needy people, already a trait of the old municipal hospitals, was clearly incorporated into the set of ideas that justified the creation of the IMAS. This is an asset that increases its capital value and helps understanding of the destination of the public resources contributed, by the whole of society, to benefit those who are most in need.

The priority population served by the IMAS are the residents of the districts of Ciutat Vella and Sant Martí. Some of the problems that have challenged us in recent times are a result of new needs and have required imaginative solutions that have put our organisational agility to the test.

Firstly, the incorporation of new technology and new diagnostic and therapeutic tools to facilitate a better approach to illness: the Hemodynamics Unit linked to the Cardiology Service, or joint projects with other institutions giving us access to new tools, useful for both research and care, for example the cyclotron, the PET and the Centre for Imaging in Psychiatry, to name but a few. These are emblematic projects involving collaboration between the IMAS and other teaching and research institutions, with which we have constituted the Institute for Advanced Technology within the framework of the Barcelona Biomedical Research Park.

Secondly, offering the service and care culture required by demographic changes and the changes in expectations that are affecting our society: an ageing population means new requirements for accessibility and assistance because of the co-existence of different chronic and long-term problems which cause dependency and incapacity for numerous reasons amongst fragile people. These changes, along with increases in demand in the maternity and childbirth area, are emerging as the most important aspects of

this new demography. Our democratically mature society wants and expects participation and information, and this expectation must be taken into account for the provision of services.

The IMAS has seen a notable increase in activity in all departments. Rising demand for emergency services has put our response capacity in this area to the test. Meanwhile, the growing birth rate, amongst both the local and immigrant populations resident in the districts that we cover, and already detected in previous years, has continued at even higher levels, and this has required significant efforts to improve both the organisational capacity and the multicultural approach of our professionals.

The experience accumulated in running the Institute for Psychiatric Healthcare (IAPS) and the Institute for Geriatric Healthcare (IAGS) has allowed us, in the year 2003, to start up the Geriatric Unit and to reinforce not only the UFISS (Interdisciplinary Social and Healthcare Unit) at the Hospital del Mar, but also the programme, combined with the 061 helpline, for attending to home emergencies of a psychiatric nature. These were all issues which had been pending solution for some time.

One of the projects that will come to fruition in the very near future is the new Hospital del Mar Forum Centre, built next to the Universal Forum of Cultures. Its proximity to the Hospital del Mar will bring improvements in accessibility and coordination.

The knowledge, skills and service attitude of its professionals make up one of the main assets of any healthcare institution, and in the case of the IMAS, our professionals deserve explicit recognition. Without their efforts and dedication, none of the projects mentioned and results achieved would have been possible.

The annual report that we are providing here is intended to become a tool for communication that presents the operating results of the centres and healthcare programmes during the year 2003. We trust that it will be a useful contribution that will help to improve the knowledge of each and every one of us.

**José Cuervo i Argudín**  
Chairman of the IMAS

### **Emergencies: greater service and better care**

*The emergency services have grown in parallel with the demographic growth of the neighbourhoods we serve*

One of the most important needs of citizens is to have access to an efficient and trusted centre that they can turn to in an emergency. The IMAS offers four facilities that initially cater for people requiring emergency treatment: the Hospital del Mar, the Peracamps Centre, the Hospital de l'Esperança and the Psychiatric Institute, the latter specialising in emergency care for mental health problems.

The Emergencies Service has experienced an increase in its activity, partly parallel to the demographic growth in the areas we serve. At the Hospital del Mar, in the year 2003 some 5,000 more visits were made than in the previous year, with the average number of daily visits reaching 233. This means it was operating at 100% capacity. For this reason, during 2003, special attention was placed on remodelling infrastructures (which this year has involved renovation of the warehouses) and improving coordination with the basic health areas in the region we cover.

■ **INFORMATION IMPROVEMENT PLAN.** In the year 2003, a project started up to improve qualitative aspects of emergency care at the Hospital del Mar, with the focus on the patient and the patient's family, with the conviction that information is one of the cornerstones of emergency care.

The project's work group brings together professional staff from different disciplines, including administration, healthcare, nursing, medicine, user service and safety.

The first step of the Information Improvement Plan was to reorganise the wayfinding signage of the entire Emergencies department, making it much more convenient and easier to follow at times of confusion and stress. This has meant new location maps and new indicator signs, designed to clearly differentiate areas, especially those related with gynaecology and obstetrics procedures.

It has also extended the timetable coverage of the information nurse as a point of reference at all times when attending to emergencies. The measures implemented have resulted in a high level of satisfaction amongst users, who feel that they are receiving better guidance and attention in one of the most delicate hospital care situations.

■ **AGAINST ABUSE.** During the year 2003, the Emergencies Service has headed up one of the most ambitious initiatives in the healthcare and social spheres: attention to cases of abuse. The emergency services are one of the key points where cases of abuse can be detected. The IMAS healthcare professionals accept the ethical and professional commitment of providing comprehensive attention for women, children and elderly people who may be suffering abuse, and we provide them with healthcare, psychological and social support.

During 2003, staff members have attended training sessions to enable them to treat and monitor people suffering from abuse, and to inform them on ways out and the support available to them.

A technical committee has produced a set of parameters for action when detecting and attending to cases of abuse. In addition, information displays and posters have been distributed to all the centres, along with over 5,000 triptychs, presented discreetly and in different languages, aimed at women who are suffering domestic abuse.

### **Outpatient visits: improving the department**

*As part of the healthcare fabric, we offer a patient-centred approach*

The Outpatients department receives a constant and increasing flow of patients during the year and last year experienced growth of 6% in first-time visits. This means that careful fine-tuning of coordination with primary healthcare services is required, and we need to study how to use the structures available to us for maximum effectiveness.

In 2003, the Hospital del Mar restructured its entire Outpatients department with an improvement plan that involved participation by all professionals whose work is related to outpatients. The objective was to detect areas where outpatient care could be improved and to offer proposals, both of a general nature and for services, which could feasibly be applied and would offer results in the short term.

Consequently, the Outpatients Surgery department, Pain Management Unit, Ophthalmology areas, meeting rooms and Gynaecology areas have all been remodelled. Organisational improvements (introduced in the first half of 2004), have involved the reinforcement of administrative, telephone and ward support staff. Counter attention has also been

improved, through training in communicative skills for high-pressure environments.

The effectiveness of the measures adopted can clearly be seen in the constant fall in non-attendance rates, reduction in cancelled appointments and increase in user satisfaction.

■ **OUTPATIENT SURGERY, ON THE RISE.** There are an increasing number of procedures in General Surgery, Neurosurgery, Gynaecology and Obstetrics, Traumatology and Urology with the protocols necessary to be conducted as Major Outpatient Surgery. This area has increased its activity in recent years, with 5,128 major outpatient interventions in 2003, a rise of 6.5%. Therefore this represents a future line of work that offers benefits to both patient and hospital: minor problems requiring surgery can be resolved in one day, with the setting up of a circuit that owes its success to good organisation and coordination, and assistance in dealing with health education, post-surgery check-ups and patient comfort.

The importance of the lines of work in Major Outpatient Surgery have required maximum improvement of the quality of equipments and areas, with investments that, including the Pain Management Unit, have totalled 118,000 euros in the year 2003.

■ **PRIMARY HEALTHCARE AND HOSPITALS, WORKING TOGETHER.** In the area that the IMAS serves, it has specialists present in most Basic Health Areas (BHA), where they establish close relations of trust with patients and primary healthcare professionals. First visits to specialists travelling to these areas to attend to people closer to their homes increased by 6% in the year 2003.

■ **GROWTH IN THE NUMBER OF DAY HOSPITAL TREATMENTS.** Day hospital activity is constantly growing. Increasing numbers of patients are being diagnosed and treated in a day, with the effort that this means in terms of organisation in order to ensure better control, avoid hospitalisation and send patients home with a fast and effective solution. Each year a growing number of protocols are defined for medical specialities treating some of the most prevalent illnesses (chronic respiratory diseases, acute attacks of some rheumatological or cardiological disorders) allowing them to be attended to during a day of diagnosis and intensive treatment at the Day Hospital.

## A global approach to surgical procedures

*Organisational, technical and care improvements help reduce waiting list numbers*

■ **PROGRAMME FOR IMPROVEMENT IN SURGERY.** Every day we work to improve the organisation and selection criteria that allow us to reduce waiting times as far as possible.

During the year 2003, we have consolidated a management model for demands for surgery, with the aim of achieving total quality in the entire process of admission, intervention and discharge. The Continuous Surgery Programme brings together medical professionals from the different surgical departments – General Surgery, Orthopaedic Surgery and Traumatology, Urology and Gynaecology – with the heads of the Anaesthesia, Nursing and Admissions departments, as well as the centre's Management, to deal with the weekly demands for surgery sufficiently in advance.

In this programme, the entire activity of the department is analysed and monitored, specific cases with special requirements are studied, and possibilities for continuous improvement are incorporated. In this way we obtain a view of new entries, in relation to our capacity, programming criteria and the monthly maintenance of waiting lists, and we can set up specific actions needed to ensure that waiting times are kept within acceptable limits for each type of procedure.

Furthermore, operating theatre hours have been extended and patients with what are known as “deferred emergencies”, in other words patients who require an operation without a long wait, although it does not have to be immediate, have been treated separately and specifically.

■ **A SIGNIFICANT DECREASE IN WAITING TIMES.** The Surgery Department at the Hospital del Mar has taken on an increased workload during the year 2003 through the implementation of extended hours, with two operating theatres working at full capacity all day long, and practically all week long.

Apart from dealing with emergencies, this intense activity in the operating theatres has also been reflected in scheduled interventions, and has allowed us to reduce the average waiting time from 5.6 to 3.9 months and reduce the number of people on waiting lists for 14 specially monitored procedures by 27%.

### Oncology, one of our priorities

*Oncology treatments are one of our top priorities because these disorders need an effective response*

Oncological disorders are currently one of our priority health problems, because they present a higher prevalence among the population and because they require decisive action: fast, efficient, coordinated and informative, always focussed on the patient and the unique characteristics specific to each case.

We are concerned with working on all aspects of oncological care, from clinical to research and basic technological support. Therefore, each year, we add new programmes that allow us to improve our care which in recent years has already achieved a high degree of excellence. All these tools for planning, speeding up, detecting and treating have allowed us to take on an increasing amount of activity, with growth reaching 12% in the year 2003.

■ **RAPID DIAGNOSIS PROGRAMME.** The Rapid Diagnosis Programme was set up two years ago. This initiative from the Barcelona Healthcare Consortium, in coordination with Catalonia's primary healthcare and oncological care services, allows oncological disorders affecting the population to be treated in a comprehensive, direct and swift way.

Patients seen by primary healthcare staff who present suspected oncological disorders enter this programme, thus a protocol is applied that allows diagnosis and decisions to be made in a very short space of time. This maximises the healthcare capacity for response and minimises the personal impact, from the very first appointment through to post-discharge care.

■ **CANCER CARE UNITS.** In the year 2003, we witnessed the consolidation of the Breast and Colo-Rectal Cancer Care Unit, which attended to 398 new cases. Coordination amongst the different services involved in treating these diseases has guaranteed greater efficiency and speed for patients throughout the entire process, from the first appointment for suspected cancer to surgical intervention and the most suitable treatment programme for each individual case. Maximum access to information for patients and families alike is ensured at all times.

The care, organisational and qualitative success of these units has encouraged us to start up projects this year for care units for prostate cancer, cervical

cancer and lung cancer. The growing number of people affected by these disorders can thus benefit from a specific system that guarantees continuity of care and coherent coordination between the administration and the medical, surgical and complementary testing departments.

#### JOANA SOTODOSOS

##### A year of fighting and of hope

Taking part in a breast-screening programme can save your life. This was the case for Joana Sotodosos, a resident of Ciutat Vella, who in the year 2003 went for the fourth time in her life for a check-up mammography at the Hospital del Mar. The result revealed a small nodule that required treatment without delay.

Joana underwent all the study tests, each and every one of the programme phases, from surgery to extensive treatment with chemotherapy and radiotherapy. Now, a year later, it appears that the process has come to an end and Joana is free of the disease.

When she looks back over the year, Joana says: "Even though they explain to you how tough it is, going through it is a personal experience that you cannot describe. I decided to fight. And I must say I haven't done it alone, but accompanied by my family and by a group of professionals who have helped me with their experience and friendliness at all times."

### Mental health, new perspectives...

*We provide 40% of the mental health care in the city*

For another year running, we have prioritised mental health care for the population of Barcelona as a line of work. Every year we attend 40% of visits carried out in the city, whether they are emergencies (7,249), hospitalisation (1,609 admissions) or outpatient appointments (33,339 visits), and we do this through the different facilities at the Institute for Psychiatric Care (IAPS), the Hospital del Mar, the Psychiatric Institute, the Sant Martí Mental Health Centre, and the Barceloneta Care and Monitoring Centre, in addition to the specialists who cooperate with the basic health areas in the region that we cover.

Furthermore, we are incorporating the mental health aspect into different processes where psychiatric problems arise in combination with other disorders, whether these be oncological, related to substance abuse, or other illnesses that affect a person's psychological and emotional state.

■ **DUAL PATHOLOGIES.** Treating dual pathologies has also been a focus of our efforts during the year 2003. These are cases that combine psychiatric illness with substance addiction, generating more intense demand for combined therapy and treatment, as well as very specific structures for attending to them. In the year 2003, a total of 68 people with dual pathologies – which have been experiencing growing prevalence amongst the population in recent years – were treated.

■ **PSYCHO-ONCOLOGY UNIT.** A notable incorporation in 2003 was that of a new speciality, in coordination with the Oncology Service, for attending to the mental health needs of patients suffering from oncological disorders and their families. The psycho-oncology unit aims to give comprehensive care to patients, to identify and treat their psychiatric and neuropsychiatric clinical condition, as well as to evaluate psychological suffering and emotional factors that may affect their perception and acceptance of both the disease and its treatment, in order to achieve the best possible quality of life.

The programme started up in April 2003, and since then has attended to 89 hospitalised patients, 159 outpatient visits and 57 inter-consultations at the Palliative Care Unit of the Hospital de l'Esperança.

■ **COORDINATION BETWEEN IAPS AND 061.** From the Mental Health Emergency Coordination Service in Barcelona, we have established close links with the 061 emergencies service. This has been achieved, firstly, through specific training for the 061 professionals with regard to the coordination and establishment of common criteria, and secondly, through the presence or localisation of our mental health specialists. The Multi-disciplinary Team for Specialised Support of 061 (EMSE), created in the year 2003, allows us to assist patients who are unconnected or have little connection with the resources offered by the city's mental health network.

During the last quarter of the year 2003, it has been possible to offer more efficient attention to over one hundred cases of mental illness detected in home settings, as well as to guarantee monitoring or

further actions for cases that previously would have remained undetected or had no continuity of care.

■ **PSYCHIATRY DAY HOSPITAL.** In 2003, the Mental Health Day Hospital started running at the Hospital del Mar, to attend to cases referred from other IAPS facilities, such as Emergencies, the Mental Health Centre or the Psychiatry ward. The Day Hospital facilitates patient accessibility and its main objective is to provide multi-disciplinary and intensive assistance in the form of partial hospitalisation, to help promote recovery and avoid unnecessary admissions. In the first year of operations, 1,212 sessions were held.

■ **OPEN DAY AT THE IMPU.** On 10 October, World Mental Health Day was celebrated at the Psychiatric Institute with an open day for the public. A debate was held to analyse how healthcare resources in psychiatry can be adapted to each individual's situation at each stage of their illness. It was an occasion to learn about the current outlook for mental health in the city of Barcelona.

Participants in the conference included representatives from patients' families along with psychiatric care and public administration professionals, who shared their experiences with those attending.

■ **CONFERENCE ON NON-VOLUNTARY ADMISSION AT HEALTHCARE, PSYCHIATRIC AND GENERAL CENTRES.** Approximately 20% of psychiatric admissions are non-voluntary. This situation, which arises frequently but is not always well-known, was the central theme of a conference in which our specialists were able to reflect on the circumstances that mean that, for health reasons, a person can be admitted for treatment against their will.

Participants at the conference ranged from magistrates to psychiatrists, and included relatives of patients who voiced their different points of view and experiences, concerns and demands regarding this complex question.



## Geriatrics: at the service of an ageing population

*Elderly people are often affected by several health conditions in combination, so they need a multi-disciplinary approach which we are in a good position to offer*

The ageing of the population is behind the fact that nearly a third of our users are aged over 75 years. It also means that activity related with care for elderly people increases year after year at the IMAS centres. The Institute for Geriatric, Social and Health Care (IAGS) is responsible for bringing together clinical attention, diagnosis and treatment by different specialists, for elderly people who are chronically or terminally ill and require social and healthcare assistance.

With regard to the activity of the Interdisciplinary Social and Healthcare Unit (UFISS), in the year 2003 it recorded growth of 25.8% on the previous year. An increase was also seen in the number of long-stay beds contracted with CatSalut, up 26.3% on 2002.

Growing demand has made necessary the extension of the UFISS with new services, both in the palliative care area – for terminally ill patients – and through the creation of the Geriatric Unit for Acutely Ill Patients, at the Hospital del Mar, in order to provide comprehensive attention for people suffering from an acute illness or deterioration of their state of health.

■ **WORLD ALZHEIMER DAY.** Our work in the field of neurosciences is oriented towards guaranteeing the comprehensive treatment of elderly people. This line of scientific work has been made known through a series of awareness-raising activities which have enjoyed the participation of health professionals, patients' relatives and the public in general. World Alzheimer Day is one of the examples most worthy of highlight.

Firstly, at the Hospital del Mar, there was a general informative conference for families and carers of Alzheimer patients from around Catalonia, which enjoyed the support of the "la Caixa" Foundation. Subjects covered included the importance of early neuropsychological evaluation, studies, and new medications. During the conference, family members and professionals were able to share their experiences and talk about how to improve responses to different needs in the daily life of patients and the people who live with them, about adaptation to the

domestic environment and about the emotions involved when the illness breaks down all the usual communication paths.

The Geriatric Centre, in turn, organised an emotive conference on living with Alzheimer's for families and patients, and showed the Argentinean film *El hijo de la novia* (Son of the Bride), about family relations and Alzheimer's Disease.

■ **PRESENT AT THE INTERNATIONAL GERIATRIC CONGRESS.** The Institute for Geriatric, Health and Social Care (IAGS) took part in the 5th European Congress on Geriatrics and Gerontology, which was held at the Palau de Congressos de Barcelona from 2 to 5 July 2003. During the Congress, there was a public presentation of the IAGS as an organisation to the medical and scientific community, with a spoken presentation and a stand where the model of the new Hospital del Mar's Forum Centre was exhibited.

■ **THE HOSPITAL DEL MAR FORUM CENTRE.** In parallel with the construction of the infrastructures for the Forum, and in the same surroundings, the new Hospital del Mar Forum Centre has been built. It is envisaged that in the year 2004 it will become home to the social and healthcare services of the IMAS, previously located at the Geriatric Centre, and including the speciality – for which demand is growing – of neurodegenerative disorders and a therapeutic community designed for mentally ill patients in the sub-acute phase. The Hospital del Mar Forum Centre is formed by a building with three bodies that converge in a central hub which contains the vertical communications, such as stairs and lifts, and with two courtyards open towards the south-east, which form an interior façade on the ground floor level with large terraces on the first, fourth and fifth floors. It is a building that is notable for its wide open spaces and the light let in by the glass façade, protected by adjustable blinds.

As for the fittings and medical equipment, we have worked especially hard to define the quantity and quality of the different sets of equipment, in order to ensure that the new centre possesses the resources necessary for combining comfort, modernity and efficiency, in line with the organisation's founding philosophy. Well worthy of highlight, for example, is the fact that the centre is fuelled by an external network to generate hot water for heating and cold water for air conditioning, an infrastructure designed under the premise of sustainability.

PACO GARCÍA TOSCANO

### **From the mountain to the sea**

Paco García has been associated with the Geriatric Centre for 26 years, i.e. since it was first set up, and shortly he will be one of the people who will be working at the new Hospital del Mar Forum Centre.

For Paco, who is in charge of the centre's warehouse, the best part of his job is the fact that it changes constantly and allows him to deal with residents, nursing professionals, administration, kitchen and maintenance staff... with many people on a daily basis. He will be leaving many memorable moments and many anecdotes behind at the Geriatric Centre, as this phase comes to a close.

For Paco, as for the other workers who will leave the city's uptown area to move closer to the sea, the Forum Centre represents a real challenge, an opportunity to start all over again, to improve and grow in both personal and professional terms. Paco's wish is that everyone pulls together to achieve a Forum Centre of the highest quality where both staff and users are both comfortable and satisfied.

## **Locomotor System Unit: internal restructuring for better service**

*Coordination, coherence and maximum effectiveness in treating disorders*

The IMAS Locomotor System Unit covers all mobility-related disorders, from traumatology to rheumatology and rehabilitation. It is a very active unit, and in the year 2003 it registered 47,625 outpatient visits to hospitals and 15,088 to the basic health areas, 3,791 hospitalisations, 1,701 sessions at day hospitals and 24,191 emergency visits.

To offer comprehensive care for patients, the Unit is organised based on the combined work of the three services. Furthermore, continuing training sessions are held with the participation of other services, where more complex cases are discussed in order to offer the best alternatives for each patient, as a result of multi-disciplinary work.

During the year 2003, the Locomotor System Unit has undergone restructuring to coordinate the human and material resources of the different

centres. Thus, the Orthopaedic Surgery and Traumatology services at the Hospital del Mar and Hospital de l'Esperança have merged under the management of a new service head. The Rheumatology Service has also merged its teams at the two hospitals in functional terms.

This process has led to improvements in the service's activity, such as the reordering of outpatient visits according to the complexity of disorders. Above all, the new service represents a model that is enthusiastically looking forward to a new phase full of treatment and scientific challenges.

Moreover, the Rheumatology Service has started up a unit for diagnostic arthroscopy and has promoted the use of the Day Hospital for implementing treatments in cases of acute inflammatory arthropathy.

■ REHABILITATION, A PIONEER OF THE NEW 21<sup>ST</sup> CENTURY STYLE. The Rehabilitation and Rheumatology Service has become a pioneer by applying a new visits model in 2003, which constitutes the option of the future for clinical documentation at our centres, and which is already functioning at 100% capacity in this service. For the first time the concept of computerised clinical history has been applied. This is a very secure system that guarantees patient confidentiality and that, thanks to web and wireless technology, can be transferred to the professional, like a notebook for accessing details from anywhere, whether the ward, the office, the patient's home or the visiting room.

The IMAS has thus initiated implementation of the Medical Workstations (ETM) and Nursing Workstations (ETI). This new tool, created by the IMAS, will be gradually rolled out to the rest of our medical and surgical services. Thus, it is planned that during 2004 and 2005, the entire Hospital de l'Esperança will function with this system. This implementation has required a significant investment in new computer equipment that guarantees maximum security of the system. It is planned that the ETM and ETI will be progressively rolled out to the other IMAS centres in coming years.



## Teaching: centres that attract students

*In the 2003-2004 academic year, 1,113 students enrolled at our formal training centres*

■ **RANGE OF SERVICES.** The range of services is distributed between the IMAS Teaching Unit's Medicine Studies, the UPF's Biology Studies, the Nursing Diploma at the University School of Nursing and the different Professional Healthcare Training courses at the Bonanova School for Vocational Training.

Quality committees, annual projects to improve facilities and online access to biomedical publications guarantee the quality of training for students.

Another important event was the signing of an agreement with the UPF and the UB for the secondment of nursing studies to the UPF.

■ **ISO CERTIFICATE AWARD AT THE BONANOVA SCHOOL.** In the last quarter, the Bonanova School has become the first public centre of Barcelona to be awarded ISO 9001-2000 certification.

ISO certification guarantees the quality of all the teaching services offered and reflects the high quality levels of our standards.

■ **INFRASTRUCTURE IMPROVEMENTS AT THE BONANOVA SCHOOL FOR VOCATIONAL TRAINING.** The Bonanova School for Vocational Training has been extended with two new classrooms, three offices, a new main entrance and a lobby to adapt the installations to the needs of the teaching activity carried out there.

■ **STUDIES FOR THE NEW NURSING PROFESSIONAL MODEL.** The University Nursing School, with over 25 years of experience, is today an academic university institution with a solid teaching project that allows students to be offered rigorous, plural and global training.

The pre- and post-graduate training offered by the School is subject to constant innovation to respond to the needs of the healthcare world and to European requirements, as included in the 1999 Bologna Declaration on Higher Education.

There are four current lines of work: implementation and growth of the practicum subjects in the third year; improvement and

integration of the organisational and teaching processes with the creation of the Virtual Campus; expansion of the Cases Management post-graduate programme and finally, reorientation of the training of nurses specialising in mental health.

### CECÍLIA LACOMA

**I cannot imagine being anything else but a nurse**

Cecília was quite sure that she wanted to work as a nurse. Her friends had spoken highly about the quality of the teaching at IMAS centres for training to meet the demands of an increasingly complex profession, and for this reason she enrolled at the University Nursing School two years ago. The 2004-2005 academic year will be her third and final year of study, and, if all goes well, she will receive her nursing diploma and will be able to join the world of work. Cecília is also course representative for her year and has taken on the role of representing her colleagues to transmit their concerns and coordinate with the teaching staff and the institution.

The best part of this course, in her view, has been the practical work experience, where she has been able to have contact with the elderly people at the Geriatric Centre, and she is nervously waiting to find out where she will be posted this year: "Maybe it will be the Hospital del Mar... I'd really like that!"

For Cecília, taking care of people requires, apart from a vocation, a great deal of responsibility, flexibility, autonomy and human psychology, and perhaps she did not imagine all that the nursing profession involves before starting her studies. For that reason she thinks it would be worthwhile for them to be extended by another year, because they are very intense and require a great deal of dedication. Her dream, once she finishes, is to continue working at our centres, and she would ideally like to specialise in paediatric and maternity nursing because she loves children.

## Research: scientific and technological merit

*Solid own resources for research and good coordination with external networks ensure leading research and a direct benefit for the healthcare that we provide*

The Municipal Institute for Medical Research (IMIM) was awarded the Catalan Government's Narcís Monturiol Prize for scientific and technological merit for its contribution to research in biomedicine and public health, to the training of highly qualified research staff and to the development of innovative formulas for research organisation and management. Furthermore, the Anti-doping Laboratory received the Manfred Donike Award as recognition for scientific excellence in anti-doping analysis at the meeting of accredited anti-doping laboratories from around the world held in Cologne (Germany).

Moreover, the Ministry of Science and Technology has accredited the IMIM Foundation's Office for the Transfer of Research Results (OTRI). This office was set up to identify the technological needs of the different economic sectors and to favour technology transfer between the public and private sector. The OTRI was formed out of the IMIM's services office, with a long experience in research projects management, and in which other staff from the IMIM and the PRBB Foundation participate.

■ **COOPERATIVE RESEARCH THEMATIC NETWORKS.** In 2003, the Ministry of Health constituted the Cooperative Research Thematic Networks (RTIC) of the Carles III Health Institute with the aim of grouping together proposals from a minimum of four autonomous regions in Spain to carry out cooperative research projects of general interest. These networks are financed with the research fund envisaged in the agreement between the Ministry of Health and Consumer Affairs and Farmaindustria. A total of 69 RTIC have been constituted in Spain, with four of these being coordinated from the IMIM. In total, IMAS centres are participating in 19 networks.

■ **INTENSE SCIENTIFIC PUBLISHING ACTIVITY.** During the year 2003, the IMAS published 157 original research articles (35 in national magazines and 122 in international magazines), a total of 9 doctoral theses were completed and 119 books, chapters or revisions were written, all with major scientific impact.

■ **WORKING TO PROGRESS IN QUALITY OF LIFE.** IMIM researchers have joined the ENCODE project (Encyclopaedia of DNA elements), set up by prestigious European and American research groups, and they represent the only Spanish centre participating in it. In this project, scientists are working to extract maximum information from the DNA sequence, in order to better understand human biology and develop new strategies for preventing and treating disease.

In the area of respiratory disorders amongst adults, the results of the study on the risk of asthma amongst domestic cleaning workers have been published in the *Thorax* magazine. This study shows the great risk posed to respiratory health by cleaning work, with one in every eight women studied suffering from asthma and one in every six from bronchitis.

■ **NEW RESEARCH STRUCTURE.** The IMAS Research Committee has proposed a new map of research units and groups for the entire IMAS that incorporates researchers from all the centres, unifies the unit concept and identifies one or more of the thematic groups within each unit.

This new map is structured into 17 research units and it will need to be validated externally in the future. It is a good tool for preparing the IMAS in its scientific relations with other institutions that will participate in the Barcelona Biomedical Research Park (PRBB). For this reason, an attempt has been made to adapt the research groups to the PRBB's six main thematic areas:

- Computational biology
- Genetic and epigenetic regulation
- Cellular and development biology
- Physiopathology and pharmacology
- Human genetics and evolutionary biology
- Epidemiology and public health

■ **IMAS RESEARCH COMMITTEE.** In 2003 there was a reorganisation of the Research Committee, a collegiate organisation offering guidance and support to the IMAS Research Management in order to guarantee the implementation of the institution's scientific policy. The new Committee was created to further promote the growth and consolidation of the research lines that are a priority for the IMAS, and those established in regional, state and European plans and in the Health Plan for Catalonia.

The Committee proposes criteria for the recruitment of professionals and the assignment of human and material resources; it supervises new project

proposals, guarantees the quality of ongoing training programmes and training for scholarship holders, promotes scientific relations between researchers from different IMAS centres and channels relations with the universities.

■ **INFOBIOMED: AN AMBITIOUS EUROPEAN PROJECT IN MEDICAL INFORMATICS.** The IMIM has been granted five million euros by the European Union to coordinate the Infobiomed project. This project consists of a network of sixteen European centres that carry out top-level research in the field of biomedical informatics. With this budget, Infobiomed is the only European network of excellence to be awarded to Catalonia within the 6<sup>th</sup> Framework Programme for Research and Development.

The objective of the Infobiomed network is to equip European healthcare systems with new informatics tools that help to improve the health and quality of life of citizens, as well as to reduce the general costs of those healthcare systems. It also aims to provide the technical and scientific infrastructure and the knowledge necessary to advance towards individualised medicine, with access to all the relevant information, from clinical records to information of a genomic, proteomic and molecular type. This line of work can contribute to advances in the detection of risks of disease, the improvement of clinical diagnosis and the development of new therapeutic strategies.

■ **PRBB.** The areas within the new building that will be occupied by the Barcelona Biomedical Research Park (PRBB) have now been distributed between the different institutions and services that will be based there. Each institution has at least one entire floor, and this means that the IMIM occupies the first and second floor, the third floor is occupied by the Department of Experimental and Health Sciences of the Pompeu Fabra University (DCEXS-UPF), the fifth and sixth floors by the Centre for Genomic Regulation (CRG) and the seventh and eighth floors by the new Centre for Regenerative Medicine of Barcelona. The fourth floor will be home to the PRBB management organisation, the Group for Research in Informatics (GRIB), the Centre for Genotyping (CEGEN) and parts of the DCEXS-UPF and of the CRG.

The PRBB campus will have around 4,000 m<sup>2</sup> free to house companies from the biomedical sector or other research initiatives. The research animals facility will be extended by around 700 m<sup>2</sup>, in the sub-basement, and the dirty area by around 400 m<sup>2</sup>.

It is envisaged that the basic building works will be completed by the end of the year 2004, then the interior adaptation of the areas will begin, and these will be refurbished by the last quarter of 2005.

## Technology to support diagnosis, investments in new equipment

*The year 2003 was a year for investment in new major equipment*

■ **MAJOR EQUIPMENT FOR THE IMAS IMAGING DIAGNOSIS INSTITUTE.** The agreement between the IMAS and the CRC Mar has allowed a notable increase in investments and the modernisation of the IDIMAS radiological infrastructures, with the acquisition of the new helical multi-slice CT scanner at the Hospital del Mar and the helical CT scanner at the Hospital de l'Esperança. The former allows, amongst other benefits, for the quantity of radiation emitted to be reduced, for reconstructions in two and three dimensions to be carried out and for complete volumetric and vascular studies to be performed.

The new radiological facilities at the Hospital del Mar allow online connection between staff from different hospitals in real time and around the clock.

■ **THE IMAGING IN PSYCHIATRY CENTRE, A LEADING-EDGE TECHNOLOGY CENTRE FOR THE STUDY OF THE BRAIN.** The Imaging in Psychiatry Centre (CIP) was the result of a collaboration agreement between the IMAS, the CRC Mar, the PRBB Institute for Advanced Technology (IAT) and the pharmaceutical laboratory company GlaxoSmithKline (GSK), which has made an investment of 800,000 euros.

This is the first and only clinical research centre in Spain based on neuroimaging techniques, with which tomographic images of the brain can be taken, making it possible to study different aspects of brain functioning in a way that is totally harmless for the patient, and therefore, to study of the causes of psychiatric disorders, which we still know so little about.

■ **THE CYCLOTRON, UP AND RUNNING.** At the Hospital del Mar/PRBB the cyclotron and the laboratory of the IAT PRBB were inaugurated. This is the first centre in southern Europe specialising in PET (positron emission tomography) in biomedical research. The investment assigned by the IAT to this centre totals 7.300,000 euros.

PET gives exceptional results for applications in the field of molecular imaging, since it allows early detection and study of diseases based on patterns that appear long before degenerative changes take place.

Molecular imaging techniques are a very powerful tool in biomedical research, especially in molecular biology and genetics, and for the development of new drugs. They have been shown to be especially efficient in the early diagnosis of malignant tumours, Alzheimer's disease, Parkinson's disease, epilepsy, schizophrenia and other obsessive-compulsive disorders, thus leaving a hopeful door open towards the possibility of treating them.

■ **INCORPORATION OF THE HOSPITAL CLÍNICA INTO THE IAT.** In the year 2003, the August Pi i Sunyer Biomedical Research Institute (IDIBAPS) of the Hospital Clínic in Barcelona has been incorporated as a collaborator in the Advanced Technology Institute (IAT), a private foundation promoted by the IMAS and the private company CRC Corporació Sanitària. This foundation is the first to start up its activities at the Barcelona Biomedical Research Park and it means a great opportunity for scientific development and that of new technologies, whilst contributing towards making Barcelona a strategic point in biomedical research in both the national and the European sphere.

■ **LEADING-EDGE INFORMATICS.** Thanks to the work of the IMAS computer services, electronic clinical records are now a reality. The development of the new medical and nursing workstations means that in less than three clicks the doctor or nurse can have access to more information than ever, such as all the patient's details, in a way that guarantees maximum quality care.

A special renting formula will allow for an investment in the telematics network for the development of the ETM and the ETI.

■ **FULLY FUNCTIONAL HEMODYNAMICS SERVICE.** The IMAS started running its new Hemodynamics service at the Hospital del Mar which allows cardiac catheterisation and is currently offering the highest level of services available amongst the units in our country.

Hemodynamics allows an anatomical and functional examination of the heart and arteries to be performed in order to find out the severity of the heart disorder. This exploration is carried out under

local anaesthetic and often allows a treatment to be carried out at the same time to open blocked arteries.

During the year 2003, the new Hemodynamics unit carried out a total of 384 explorations.

#### JULIO LIBKIND

##### **Beyond the machines lie people**

When talking about facilities, machines, investments, it is easy to get carried away and forget for a moment what they mean in peoples' lives. An hour in the Hemodynamics room –along with many more hours of preparation and later rehabilitation – changed the life of Julio Libkind, a patient of the Cardiology Service at the Hospital del Mar.

Mr. Libkind was suffering from a serious heart condition. It was a difficult and high-risk case. He had previously undergone treatments including several surgical interventions but his progress was not good. Under the recommendation of one of the most prestigious specialists in the field of cardiology, he went to what he was told was one of the most modern and well-prepared hemodynamics units in the country, which had recently been inaugurated at the Hospital del Mar. "As well as the major facility they have available there, which is like something from science fiction, there are the people who run it. My own experience was fantastic. And I am not only talking about friendliness and kind treatment, but also the great professionalism and passion that the team puts into its work. For me, the intervention that I underwent was the right one and it has meant a radical change in my life. We all ran a lot of risks. But what surprised me is that, when it was over and we knew it had been a success, the team were even happier than I was, and instead of expecting to be congratulated, it was the team who came to congratulate me. Because I wasn't completely asleep, I witnessed the most decisive moment of my life. I will never forget it."

## Improving quality

*The quality projects of the IMAS show its enthusiasm for excellence in its work and its vocation to offer the best possible healthcare for people*

The Quality Committees are bodies that bring together different professionals who are involved in determining and assessing the quality of a certain area of healthcare, whilst promoting the coordination, responsibility and participation of professional staff. In 2003, five of the 19 quality committees in existence were created or boosted: Pain Assessment and Treatment, Investments, Assistance for Domestic Abuse, Nutrition and Perinatal Pathology.

Each intervenes in quality control from different spheres, for example, the new Committee for Pain Assessment and Treatment aims to find out the incidence and intensity of pain in different groups of patients treated at our centres and to improve their treatments for maximum avoidance of suffering through the definition of better improvement criteria, even including the information that professionals and patients themselves should be given.

■ **IMASQUAL: COMPREHENSIVE QUALITY.** The IMASqual Plan for Total Quality was created to incorporate the different initiatives that are launched in relation with quality.

The objectives are to introduce methodologies that allow, firstly, the systemisation of quality assessment, and secondly, the orientation of decision-making on new improvement proposals according to the Catalonia Health Plan's strategic plan. It must be said that, in 2003, 88.7% of the objectives of the Hospital del Mar's Health Plan were met, as were 91.9% of the objectives of the Hospital de l'Esperança.

■ **PERCEIVED QUALITY: USER OPINION IS HIGHLY VALUED.** It is important for us to be aware of users' opinions regarding the assistance that they receive at different moments during healthcare procedures. Every year we promote quality surveys to find out their impressions and discover improvement opportunities. The surveys carried out in 2003, amongst a total of 441 patients from Hospital del Mar, Hospital de l'Esperança, the Geriatric Centre and the Psychiatric Institute have shown us that 94% of our users are satisfied or very satisfied with the overall care received and that 93% would recommend IMAS centres to their families and friends.

The aspects of treatment of patients and respect for their privacy received excellent scores, and we are able to confirm that we have especially improved in administrative areas, with the simplification of procedures and clarity in the identification and presentation of all medical staff. Also scoring highly were aspects relating to the information offered by doctors and nurses and the introduction and clarity of informing documents such as informed consent.

■ **PUBLICATIONS OF INTEREST.** The work carried out by the various quality assessment committees and bodies can be consulted in news bulletins that are published regularly. These incorporate the results of studies carried out and proposals for improvements and health education.

In 2003, for example, bulletins published included that of the Pharmacy and Therapeutic Committee or the bulletin of recommendations for decision-taking when a patient refuses to accept blood transfusions, promoted by the Healthcare Ethics Committee and aimed at the general public.

■ **CLINICAL PATHS: QUALITY IN NURSING.** At any healthcare centre, nursing is a constant presence and acts as a link between the patient and the hospital world. The quality of nursing is essential for the overall healthcare provided, and two tools used to guarantee it are clinical paths and treatment plans.

These paths and plans are documents that are used to define what needs to be done and which treatments need to be applied to a particular condition and a particular patient, applying quality criteria and in a standardised way. They are produced from a consensus between different medical professionals such as doctors, rehabilitation specialists, speech therapists and social workers, and involve a considerable effort in terms of methodology and rigorous detail, as well as distancing from one's daily work in order to describe how something that is done intuitively must be done, how to consult a bibliography, how to write and take responsibility for decisions made, and this also raises professional self-esteem. It is, therefore, a process that incites enthusiasm amongst staff and is very beneficial for patients: proof of the quality of IMAS nursing.



## Participation, 20 years at the city's service

*The IMAS was a pioneer in the constitution of municipal healthcare organisations*

In 2003, the Municipal Healthcare Institute (IMAS) celebrated its 20th birthday, with different events that have allowed us to review the institution's history, recognise the milestones achieved and mark out new challenges and projects for the future. The main event was attended by the mayor of Barcelona, the health minister for Catalonia and the president of the IMAS.

Our institution was founded in 1983 with a mission to serve the city, and we believe that we have consolidated a project of public will and social responsibility. We have contributed to transforming Barcelona's healthcare model with a commitment to teamwork, good patient treatment, technological innovation and the training of both new professionals and those who have been working for a longer time, with a management based on the public business model where the profits sought are benefits for citizens.

We have been capable of integrating medical care, surgical care, social healthcare, immigrants, elderly people, critical patients, drug addicts and the mentally ill, with a culture of leadership in research, the application of new technologies and the will to rise to major challenges such as that of the Olympic Games in 1992 and today, the Hospital del Mar's Forum Centre. Our most immediate future objectives are to strengthen relations between primary, healthcare and social teams, to equip ourselves with the latest advances in imaging diagnosis in cardiology and in treatment for cancer, and to set up the Barcelona Biomedical Research Park.

■ **NEW PLAN OF USER RIGHTS.** We have provided our users with the new Charter of rights and duties of citizens in relation to health and healthcare. This charter places within reach of patients and their families the latest adaptation of citizens' rights and duties, which were issued for the first time in 1986, and it incorporates new aspects for advancing in the respect for people's dignity and in the improvement of healthcare.

■ **NEW PEOPLE, NEW NEEDS.** In tune with new times and new needs, the Hospital del Mar is promoting work in cultural mediation so that we can adapt to our entire public and offer the best service to all citizens in Barcelona. In this centre,

nearly 12.6% of people admitted in the year 2003 were foreigners. For this reason, a new figure has appeared: that of cultural mediator, a professional who facilitates the healthcare and integration of users of the most diverse origins.

Since June 2003, the centre's cultural mediators have been involved in 2,164 interventions and have attended 720 people. The majority of foreign patients come from countries such as Morocco, Pakistan, Romania, Ecuador and China. Furthermore, our most important publications have been translated into other languages such as Urdu, Rumanian and Arabic.

■ **OPENING OUR DOORS TO CITIZENS.** Our centres are open to citizens. Every year we promote open days that offer people in the regions that we cover the opportunity to visit the different centres.

In addition to the open days at the Geriatric Centres, held on World Alzheimer's Day, or that of the Psychiatric Institute, held on World Mental Health Day, open days were also held at the Pathological Anatomy Service of the Hospital del Mar to coincide with European Cancer Week. The people who visited us were able to gain access to structures that are not very well known but that are fundamental for the detection of oncological pathologies. Accessibility, dialogue and curiosity were the key elements of the day.

■ **SCIENCE FOR EVERYONE.** Information, accessibility, communication and proximity to our users are essential for establishing links of trust and meeting the targets that we set in terms of healthcare education. It is for this reason that we joined the Medicine in the Street initiative promoted by the Barcelona City of Knowledge Department, which consisted of promoting medical knowledge and improving the quality of life and capacity for decision-making on the health of the populace. Medicine in the Street was supported by the Doctors' Professional Association, different hospitals and media such as the *El País* newspaper and BTB. The Hospital del Mar participated in this cycle with three talks: "Anxiety disorders in the 21st century", "Osteoporosis, perspectives in the third millennium", and "The threats from new infections".

The Hospital del Mar also took part in the Health and Elderly People cycle at the Barceloneta Civic Centre with an informative talk on osteoporosis and three sessions to carry out bone densitometries on those people interested.

■ **FILLING THE HOSPITALS WITH ART.** The Art-User Programme started functioning some fifteen years ago in different IMAS centres with the desire to change the classic hospital environment with a project that includes elements of personal art, colour and leisure and encouraged workers and users to request spaces to exhibit their works.

The Hospital del Mar was host to the following exhibits in the year 2003:

- “Pictures”, by Carlos Castro
- “Pastel and pencil drawings”, by Pura Díaz
- “Paintings”, by Mario Torino
- “Moments of light and colour”, by Adolfo Rua
- “Poetic vision”, by Ghuty Mamae
- Exhibition of paintings by 40 pupils of Mercè Vall Hom
- “Caresses”, by Patxi Fernández
- “Evocation”, by María Gómez Casas
- “Bone landscape”, by Mónica Tudela
- “Illusions”, by Ely Yelo
- Exhibition of the works competing in the 7th Photographic Competition organised by CC.OO. (trade union) and the IMAS

In addition, the Geriatric Centre organised the photo exhibition “Digital Detail”, by Pep Gràcia, “From Blue to Red”, a display of painting by Carles Castro, and the watercolours “Notes in Passing”, by Pepa Viladomiu.

■ **COLLABORATING ORGANISATION OF FORUM 2004.** The Hospital del Mar was designated a collaborating organisation of the Universal Forum of Cultures of Barcelona 2004. The IMAS was in charge of healthcare coverage of the event, and it was also a reference point for the healthcare of the Forum works personnel.

The IMAS contributed knowledge and experts in the scientific and social fields and participated actively in the dialogues “Health and development: challenges for the 21st century” and “The social brain: biology of conflicts and cooperation”.

## **Our professionals, our most valuable resource**

*Work safety and prevention, staff incentives and internal communication at the service of professionals*

The IMAS closed the year with a workforce of 2,135 permanent workers (equivalent to 1,983 on a 40 hour week), including 443 with higher qualifications, 152 resident doctors, 692 with intermediate qualifications, 217 administrative staff, 470 care auxiliaries, 14 skilled workers, one priest and 80 unskilled workers.

By centres, the Hospital del Mar has the largest workforce, of 1,183 people, followed by the Hospital de l'Esperança with 368, the IMPU with 158, the Geriatric Centre with 153, the IMIM with 58 and the services for sexual and reproductive healthcare.

Also during 2003, some 134 permanent contracts were signed, after public advertising of the positions, corresponding to two heads of service, one head of section, seven assistant doctors, 38 nurses, 45 nursing auxiliaries, 27 administrative auxiliaries and 14 workers from other categories.

■ **CONTINUING PROFESSIONAL CAREERS.** With the professional careers/incentive programmes the aim is to facilitate the adaptation of profiles to the needs of each healthcare area through salary benefits for workers in accordance with their professional merits and aptitudes.

This new system has been applied in the last two years to groups of doctors and nurses from healthcare and teaching centres, and is now definitively implemented. During the year 2003, incentive programmes were applied to groups of intermediate technicians, administrative auxiliary staff and machine operators, amongst others.

■ **ONGOING TRAINING.** Training and refresher courses for professionals are a vital factor in offering the best care quality and to guarantee the involvement and motivation of workers, as well as allowing professional development and fulfilment, participation and the exchange of experiences.

In 2003, some 66 different training schemes have been carried out with approximately 41% of the IMAS staff attending them.

The ongoing training of professionals working for this institution obeys three main principles. The

first is to give support for organisational changes in the institution such as the implementation of the new doctors' and nurses' workstations, or the adaptation of professionals to new structures such as the future transfer of workers from the Geriatric Centre to the Hospital del Mar.

Secondly, schemes are organised to improve professional skills, scientific knowledge and communication, with courses on work safety, conflict management, infection prevention, containment of mentally ill patients during crises, or training in good practice for newly incorporated nurses and resident doctors.

And, finally, ongoing training also detects the new needs raised by users, typical of a changing society like our own, and prepares courses on inter-cultural issues and integration into the healthcare system of the immigrant population, specific treatment for teenagers, support for mental illness and the detection and support of victims of abuse.

■ **INTRANET.** Our concern for fluidity in internal communication, access to information and the management of the knowledge base of our human capital is behind one of the most active chapters in the year 2003, within the IMAS intranet project.

The intranet is an innovative, flexible and dynamic tool and stands as a single point where all workers from the different centres can find all IMAS-related information.

■ **WORK SAFETY AND HEALTH.** One of the priorities of the IMAS is to look after the health of the institution's professionals and to guarantee their correct training in work safety. For this reason, programmes and campaigns are run annually on different issues, such as taking care of health, initial risk evaluation, emergency plans at centres, industrial hygiene, ergonomics, guidance in work safety and training and information activities.

In the section dealing with taking care of health, 399 medical check-ups were carried out, 754 flu vaccines were administered, 100% of the workforce was vaccinated against hepatitis B, and other vaccinations have been provided on an optional basis, in addition to tetanus and diphtheria.

During the year 2003, also worthy of mention was the Emergency Plans Department, which trained workers at the different centres with guidelines for cases of evacuation, catastrophe or fire.

## ENRIC CÁCERES

### A year of changes for the IMAS Traumatology Service

In January 2003, Dr. Enric Cáceres joined the IMAS as head of the Orthopaedic Surgery and Traumatology Service (COT). In doing this, he accepted the challenge of merging two major Traumatology and Orthopaedic Surgery services, such as those of the Hospital del Mar and the Hospital de l'Esperança. For him, therefore, 2003 was an intense year of transition, but also one of new objectives and projects. He has managed to make their fusion possible without difficulties and with excellent results in terms of care productivity, as well as bringing online an enthusiastic programme of teaching and research.

Looking ahead, his priorities are to achieve effective care for the most urgent needs amongst the public we serve, such as the pathology of ageing, and at the same time to specialise in other pathologies, such as those of the back – with an interesting multi-disciplinary project for the treatment of tumours –, or of the shoulder, which will allow us to gain a position as an indisputable point of reference in these areas, just as we are already in revision knee and hip arthroplasties.

## Courses with tradition and prestige

*New courses and re-edited versions of existing courses to allow the medical community to update their knowledge*

■ SEMINAR FOR ANTICIPATING THE NEEDS OF THE POPULATION. The Clinical Evaluation and Epidemiology Service (SAEC) organised a seminar and a study on the uncovered healthcare needs of populations in large cities.

Some of the issues that were examined were methods for analysing these needs, and models for planning them and for measuring their impact and quality. This shows our concern with anticipating what is needed and will be needed by our population in health terms. To do this, we have had the help of a distinguished guest, Professor Donald Steinwachs, of the Johns Hopkins Bloomberg School of Public Health in the United States.

■ CONFERENCE ON ABUSE. The IMAS has created the Committee on Abuse and organised a specific conference on the subject of abuse and its detection by the healthcare services. For the first time, a single conference brought together the three main groups of people who suffer abuse of any type with the greatest frequency: women, elderly people, and children and teenagers.

Participants included professionals who are experts in detecting and providing assistance for cases of abuse from the IMAS and from different Catalan hospitals and members of the specific care facilities, reference programmes, municipal councils and forensic medicine experts.

■ COURSE ON THE EPIDEMIOLOGY OF HOSPITAL INFECTION. The fourth Course on the epidemiology of hospital infection was held in the year 2003. Every year this course reviews the basic concepts of hospital epidemiology, risk assessment, control and surveillance of nosocomial infections from the perspective of the Center for Diseases Control and Prevention of Atlanta, and every year participants include eminent scientific experts such as Dr. Juan Alonso-Echanove.

■ MEMORIALS AND TRIBUTES TO OUR PROFESSIONAL STAFF. For over a decade, different prizes have been awarded and memorials held in tribute to some of those IMAS professionals who dedicated their lives to our centres and patients and who have now left us. Under their names, activities are carried out in support and recognition of new

talents and values that open new horizons in the sphere of medicine.

Highlights amongst these tributes include: the 14th Joan Vivancos Memorial, which is held in memory of this internal medicine expert and exponent of pure clinical work; the 5th edition of the Lino Torre Memorial, remembering a surgeon who was also a passionate teacher, and finally the Giménez Camarassa Conference-Tribute, representing recognition of the dermatologist who left us recently, with the participation of the most eminent experts in this specialist area.

## ■ MEDICAL CARE

Cardiology	Hospital del Mar
Coronary Unit	Hospital del Mar
Haemodynamics	Hospital del Mar
Dermatology	Hospital del Mar
Digestive medicine	Hospital del Mar
Endocrinology and nutrition	Hospital del Mar
Internal medicine	Hospital del Mar
Infectious medicine	Hospital del Mar
Nephrology	Hospital del Mar
Neurology	Hospital del Mar
Neurophysiology	Hospital del Mar
Neuro-psychology	Geriatric Centre
Pneumology	Hospital del Mar
Rheumatology	Hospital de l'Esperança and Hospital del Mar

## ■ ONCOLOGICAL CARE

Haematology	Hospital del Mar
Oncology	Hospital del Mar
Radiotherapy (Radiotherapeutic oncology)	Hospital de l'Esperança

## ■ CARE FOR THE CRITICALLY ILL

Anaesthesiology, reanimation and pain therapy	Hospital del Mar and Hospital de l'Esperança
Intensive medicine	Hospital del Mar

## ■ SURGICAL INTERVENTIONS

General surgery	Hospital del Mar
Maxillofacial surgery	Hospital del Mar
Orthopaedic surgery and traumatology	Hospital del Mar and Hospital de l'Esperança
Vascular surgery	Hospital del Mar and Hospital de l'Esperança
Neurosurgery	Hospital del Mar
Ophthalmology	Hospital de l'Esperança and Hospital del Mar
Ear, Nose and Throat	Hospital del Mar
Urology	Hospital del Mar and Hospital de l'Esperança

## ■ MOTHER AND CHILD

Obstetrics and gynaecology	Hospital del Mar
Sexual and Reproductive Healthcare Service	Ciutat Vella and Sant Martí
Paediatrics	Hospital del Mar
Paediatric surgery	Hospital del Mar
Neonatal	Hospital del Mar

## ■ REHABILITATION

Physical Medicine and Rehabilitation	Hospital de l'Esperança
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■ PSYCHIATRIC CARE INSTITUTE: MENTAL HEALTH AND DRUG ADDICTIONS (IAPS)

Psychiatry	Hospital del Mar, Psychiatric Institute and Hospital de l'Esperança
Drug Addictions	Hospital del Mar

■ EMERGENCY CARE

Emergencies	Hospital del Mar, Hospital de l'Esperança, Peracamps Centre and Psychiatric Institute
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■ GERIATRIC AND SOCIAL HEALTH CARE INSTITUTE (IAGS)

Acute Patients Unit	Hospital del Mar
Geriatrics	Geriatric Centre
Convalescence Unit	Hospital de l'Esperança
Geriatric UFISS <sup>(1)</sup>	Hospital del Mar
PADES <sup>(1)</sup>	Geriatric Centre
Palliative Care Unit	Hospital de l'Esperança

■ SUPPORT SERVICES

Clinical analyses <sup>(2)</sup>	Hospital del Mar, Hospital de l'Esperança, Geriatric Centre and Psychiatric Institute
Pathology	Hospital del Mar and Hospital de l'Esperança
Transfusion Service	Hospital del Mar and Hospital de l'Esperança
Pharmacy	Hospital del Mar, Hospital de l'Esperança, Geriatric Centre and Psychiatric Institute
Image Diagnosis (IDIMAS)	Hospital del Mar and Hospital de l'Esperança
Evaluation and Clinical Epidemiology Service	Hospital del Mar, Hospital de l'Esperança, Psychiatric Institute and Geriatric Centre

(1) UFISS: Interdisciplinary social healthcare functional unit.

PADES: Programme of home care – support teams.

(2) This activity is carried out by the Laboratori de Referència de Catalunya, a company whose major shareholder is the IMAS.